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It does NOT get mailed to the applicant.

**NOTICE OF FILING / CLAIM FEE(S) DUE
(CALCULATION SHEET)**

APPLICATION NUMBER: 09 593215

Total Fee Calculation

| Fee Code | Total # Claims | Number Estm | X | Fee | Fee | Total |
|-------------------------|-------------------|----------------|----------|-----|-----|---------------|
| Basic Filing Fee | <u>201.00</u> | | | | | <u>690</u> |
| Total Claims >20 | <u>201.00</u> | <u>24</u> | <u>4</u> | | | <u>72</u> |
| Independent Claims >5 | <u>202.00</u> | <u>2</u> | <u>1</u> | | | |
| Multi Dep Claim Present | <u>204.00</u> | | | | | |
| Surcharge | <u>205.00</u> | | | | | <u>130/45</u> |
| English Translation | <u>150</u> | | | | | |

TOTAL FEE CALCULATION

892

Fees due upon filing the application

Total Filing Fees Due = \$ 892

Less Filing Fees Submitted = \$ 0

BALANCE DUE = \$ 892

SAC

Office of Initial Patent Examination

Figure 7

BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

09 593215

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY
TYPE

OTHER THAN
SMALL ENTITY
OR

| FOR | NUMBER FILED | NUMBER EXTRA |
|----------------------------------|--------------|--------------|
| BASIC FEE | | |
| TOTAL CLAIMS | 24 | minus 20 = 4 |
| INDEPENDENT CLAIMS | 2 | minus 3 = * |
| MULTIPLE DEPENDENT CLAIM PRESENT | | |

| | |
|--------|--------|
| RATE | Fee |
| | 345.00 |
| X\$ 9= | |
| X39= | |
| +130= | |
| TOTAL | 160 |

| | |
|--------|--------|
| RATE | Fee |
| | 690.00 |
| X\$18= | 72 |
| X78= | |
| +260= | |
| TOTAL | 160 |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OTHER THAN
SMALL ENTITY
OR

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| Total | * | Minus | ** | = |
| Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | |

| | |
|--------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$ 9= | |
| X39= | |
| +130= | |
| TOTAL ADDT. FEE | 160 |

| | |
|--------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$18= | |
| X78= | |
| +260= | |
| TOTAL ADDT. FEE | 160 |

| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| Total | * | Minus | ** | = |
| Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | |

| | |
|--------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$ 9= | |
| X39= | |
| +130= | |
| TOTAL ADDT. FEE | 160 |

| | |
|--------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$18= | |
| X78= | |
| +260= | |
| TOTAL ADDT. FEE | 160 |

| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| Total | * | Minus | ** | = |
| Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | |

| | |
|--------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$ 9= | |
| X39= | |
| +130= | |
| TOTAL ADDT. FEE | 160 |

| | |
|--------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$18= | |
| X78= | |
| +260= | |
| TOTAL ADDT. FEE | 160 |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.